

Testimony in Support of S.B. 991, An Act Concerning Medicaid Reimbursement for Community Health Workers
Human Services Committee
Rosa Gonzalez Juarez
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Dear Senator, Lesser, Representative Gilchrest, and esteemed members of the Human Services Committee,

My name is Rosa Gonzalez Juarez and I live in New Haven, Connecticut. I am also a 2023 Candidate for the Master of Public Health at the Yale School of Public Health and a former Community Health Worker.

I stand in support of S.B. 991, An Act Concerning Medicaid Reimbursement for Community Health Workers. Currently, Connecticut's Medicaid program does not reimburse Community Health Worker (CHW) services or incentivize health care providers to work with CHWs. Community health workers are an effective way to address inequities and promote health, particularly for low-income households served by Medicaid.

Having worked as a Bilingual Community Health Worker in rural Northern California, I provided free Bilingual high blood pressure screenings to low-income residents outside grocery stores, at health fairs, outside libraries, and at various Boys & Girls Clubs throughout the county. More than once, we would see someone who had high blood pressure, or they would share with us that they ended up at the Emergency Room due to their uncontrolled blood pressure and they were unsure how to best regulate their blood pressure. We would then provide them with education on; the importance of securing medical care with a provider, find out why they were unable to adhere to their medication, discuss lifestyle changes they could make to improve their health outcomes and/or connect them to one of the local Federally Qualified Health Centers.¹

One of the most impactful roles I had while being a Bilingual Community Health Worker was providing support and informed health coaching to 32 low-income patients with high blood pressure. By working together, we were able to establish Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART) goals that were specific to them and their lifestyle changes. I would check-in with them on a weekly basis and we would discuss any issues they were currently dealing with, medical and non-medical. One participant was meeting all of her goals: losing weight, increasing her fruit and vegetable intake, being physically active every day and decreasing her intake of sugary drinks. All these changes contributed to her blood pressure being well-managed and her mood being positively impacted. The participants who were struggling managing their blood pressure, often needed to be connect to other services in the county, such as food banks, dental services or where to apply for Medicaid.² In doing so, they

¹ Peretz, P. J., Islam, N., & Matiz, L. A. (2020). Community Health Workers and Covid-19—Addressing Social Determinants of Health in Times of Crisis and Beyond. *New England Journal of Medicine*, 383(19), e108(1). <https://doi.org/10.1056/NEJMp2022641>

² Wilkinson, G. W., Mason, T., Hirsch, G., Calista, J. L., Holt, L., Toledo, J., & Zotter, J. (2016). Community Health Worker Integration in Health Care, Public Health, and Policy: A Partnership Model. *Journal of Ambulatory Care Management*, 39(1), 3. <https://doi.org/10.1097/JAC.0000000000000124>

were able to focus on successfully managing their blood pressure.

Because the Community Based Organization in Northern California paid a living wage to community health workers, I was able to successfully engage community members without having to worry about making ends meet. I was fortunate, unlike some of my colleagues who had to be laid off because the organization ran out of grant funds that would make it possible for them to continue being employed. Their job responsibilities now had to be delegated to other individuals, who may not have the full capacity to take on these new roles. For organizations to avoid having to deal with these issues, being able to be reimbursed by Medicaid at a high rate, will not only enable providers to employ CHWs, but will also cover the costs of supervision, billing, and routine training.³

States such as California, Indiana, Louisiana, Minnesota, Nevada, Oregon, Rhode Island, and South Dakota, all have state plan amendments that include community health workers into state Medicaid programs for specific sets of services provided by CHWs.⁴ A 2020 Randomized Control Trial found, “Overall, a team of community health workers saved Medicaid \$1,401,307.99. These savings divided by program expenses (\$567,950.82) yielded a return of \$2.47 for every dollar invested, realized within a single fiscal year.”⁵ A Report by the Kaiser Family Foundation mentions, 29 of 48 states reported allowing Medicaid payments for services provided by CHWs as of July 1, 2022.⁶

Keeping everything, I have mentioned in mind, I support S.B. 991, An Act Concerning Medicaid Reimbursement for Community Health Workers, and I ask the committee to support and pass this legislation. Thank you for the opportunity to testify. If you have any further questions, or concerns, feel free to contact me at rosa.gonzalezjuarez@yale.edu

Sincerely,
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³ Wilkniss, E. H., Sandra. (2022, December 8). State Approaches to Community Health Worker Financing through Medicaid State Plan Amendments. NASHP. <https://nashp.org/state-approaches-to-community-health-worker-financing-through-medicaid-state-plan-amendments/>

⁴ Summary of Medicaid State Plan Amendments for Community Health Workers. (n.d.). 1–9. <https://www.chcf.org/wp-content/uploads/2022/08/SummaryMedicaidStatePlanAmendmentsCHWs.pdf>

⁵ Kangovi, S., Mitra, N., Grande, D., Long, J. A., & Asch, D. A. (2020). Evidence-Based Community Health Worker Program Addresses Unmet Social Needs And Generates Positive Return On Investment: A return on investment analysis of a randomized controlled trial of a standardized community health worker program that addresses unmet social needs for disadvantaged individuals. *Health Affairs*, 39(2), 211. <https://doi.org/10.1377/hlthaff.2019.00981>

⁶ Halder, S., Jan 23, E. H. P., & 2023. (2023, January 23). State Policies for Expanding Medicaid Coverage of Community Health Worker (CHW) Services. KFF. <https://www.kff.org/medicaid/issue-brief/state-policies-for-expanding-medicaid-coverage-of-community-health-worker-chw-services/>